			For u	use of this form	LEAV , see AR 6	<b>E CONTR</b> 00-8-10; th	OL LOG e proponent	agency is 0	DDCSPER.						
CONTROL DATA					AUTHORIZED ABSENCE		EXTN CHARGEABLE LE			AVE		CHARGEABLE DATA FROM FO			
CONTROL * NUMBER	DATE ASQ	LEAVE CODE **	NAME AND SOCIAL SECURITY NUM	MBER GR	DATE FROM	DATE TO	DATE TO	DATE FROM	DATE TO	NO. OF DAYS	DATE ORIG TO FO	JSS LEAVE REPORT	NO. OF DAYS	DATE MEMO TO FO	INT
* PLACE A CHECK IN THIS COLUMN FOR CORRECTED LEAVE ENTRY  ** TYPES OF LE LEAVE IN CO							ANSITION - ARY LEAVE		ONVALESCI I CONJUNC		PCS - I OFFICIAL		Γ - I · OT		